



GREENBELT COMMUNITY CENTER

15 Crescent Rd, Greenbelt, MD 20770
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FACILITY RENTAL APPLICATION

Name: _____ Date Of Application: _____

Address: _____ City/St/Zip: _____

Phone Number: Home: _____ Work: _____ Cell: _____

E-mail address: _____

Rentals at the Greenbelt Community Center are scheduled on a quarterly basis. Below are the dates for the next four quarters. Applications will be accepted on an on-going basis. Final approval will be given in accordance with the dates listed below.

Applications for the period of:

June 14, 2006 thru September 12, 2006
September 13, 2006 thru December 31, 2006
January 1, 2007 thru March 19, 2007
March 20, 2007 thru June 15, 2007

Final Approval Given After:

May 10, 2006
August 10, 2006
November 10, 2006
February 10, 2007

****One Time Rentals of the Multi-Purpose room may rent up to six months in advance of desired rental date.****

	<u>Resident Hourly Rate</u>	<u>Non-Resident Hourly Rate</u>
_____ Gymnasium (Sports Only) (106)	\$40.00	\$50.00
_____ Multi-Purpose Room (201)	\$35.00	\$45.00
_____ Theater Rehearsal Room (202)	\$20.00	\$30.00
_____ Senior Classroom (114)	\$20.00	\$30.00
_____ Senior Conference Gallery (112)	\$20.00	\$30.00
_____ Dance Studio (10)	\$30.00	\$40.00
_____ Community Meeting Room (103)	\$20.00	\$30.00
_____ Kitchen** (107)	\$30.00	\$40.00

Date of Rental: Start : _____ Day of Week: _____
End: _____ Time: _____ to _____

Number of Tables Needed: _____ Number of Chairs Needed: _____

****Kitchen rental requires a PG County Food Service Manager License****

Thank you for choosing the Greenbelt Community Center for your rental. The dates and times you have requested will be reserved only after this application is approved and appropriate fees have been paid. A valid credit card number must be provided and will be charged up to \$500 if facility rules and policies are violated or damage to the facility or its contents occurs during the rental time.

CREDIT CARD INFO: Card Type: _____ Card Number: _____
CVV# _____ (the last 3 digits of the italicized number in the signature box on your card) Expiration Date: _____

By signing this form you agree to accept responsibility to abide by all procedures and rules outlined in the "Facility Usage Policy" document and understand all penalties associated with not abiding by these policies.

Applicants Signature: _____ Date: _____

Description of Event: